



Arizona Department of Revenue
Collection Division
Affidavit

Reference:

(License or File Number)

(Case File Number)

I, _____ ,
Name

of, _____ ,
Address

being duly sworn, I do depose and say as follows:

Under penalties of perjury, I declare that to the best of my knowledge and belief, this information is accurate and complete.

Signature of Affiant

Date

State of Arizona)

)

County of _____)

Subscribed and sworn (or affirmed) before me this ____ day of _____, 20 ____.

(seal)

Notary Public